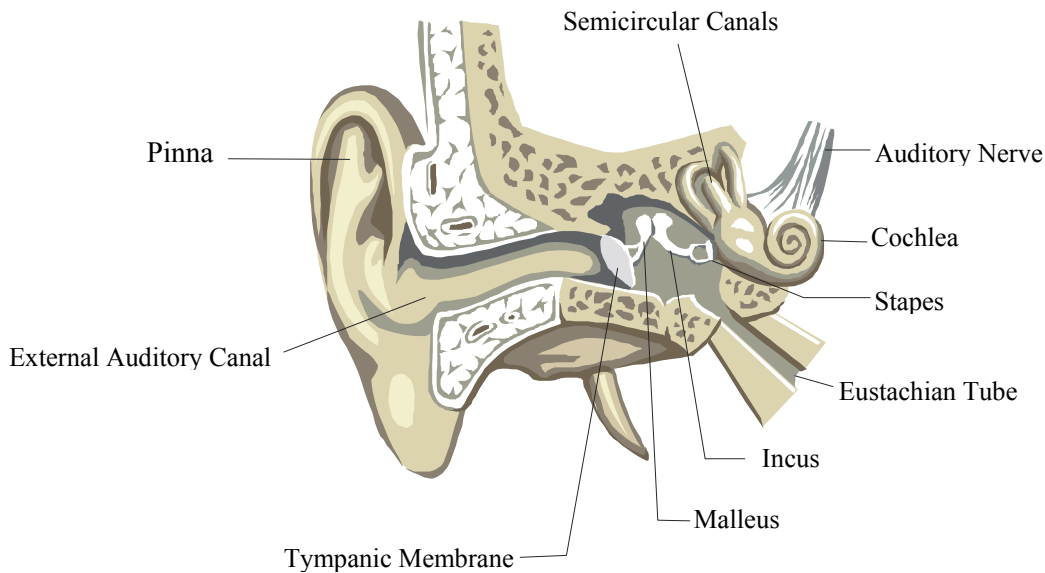


A DIAGRAM OF THE EAR



OTOLOGY CLINIC INFORMATION

Your local health department, working with the Michigan Department of Community Health, has arranged for an otologist (ear specialist) to examine each child who comes to today's clinic. The medical examination will help determine if your child has a hearing problem and what is likely to be the cause. A diagnosis and recommendation will be given, while treatment may or may not be provided. There is ***no charge*** for this clinic visit, but further treatment or a return visit to an otologist is the responsibility of the parent.

WHAT ARE THE OUTCOMES OF TODAY'S VISIT?

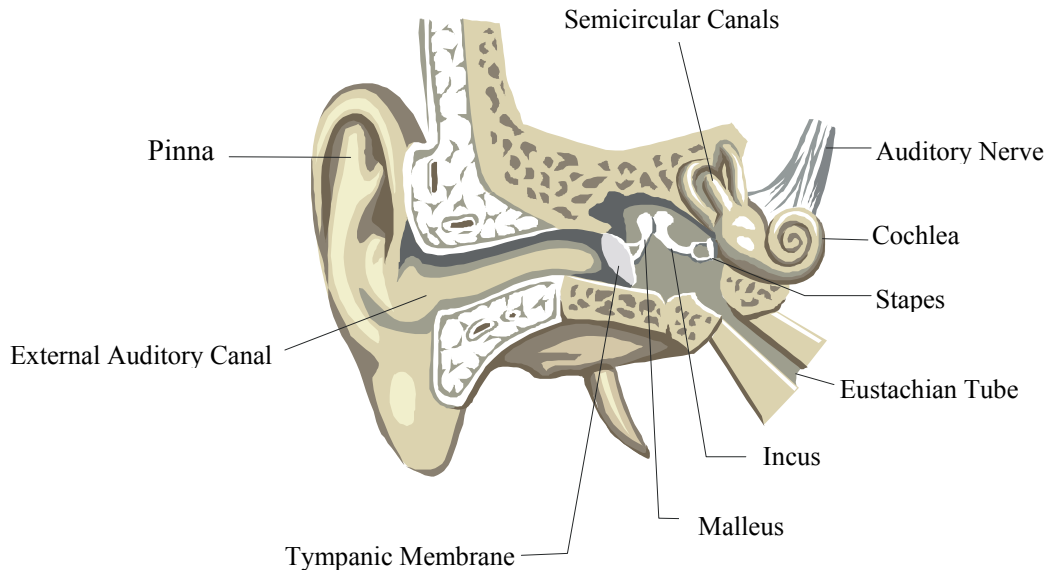
NORMAL EXAM: Typically, one out of five children who attend today's otology clinic will have normal hearing. This is not unusual. The child may have had a cold or congestion when the hearing test was performed, but have since recovered spontaneously.

WAX: Several children at the clinic may have excessive wax (cerumen) in their ears. It is normal to have some wax because it protects the ear. If wax completely blocks the ear canal, it may cause a decrease in hearing. You should **not** try to clean the ear with cotton swabs, hair pins, etc. Let the doctor advise you on keeping the canal clear.

FLUID WITH OR WITHOUT INFECTION: Children often experience otitis media, an infection in the middle ear, at some point during childhood. The fluid or infection very often occurs because the Eustachian tube becomes blocked. in the middle ear space, which is an air-filled cavity in a normal functioning ear. Medical treatment usually restores the natural ventilation to the middle ear space, and in turn improves hearing. Ear aches, ear discharge, and fewer often are symptoms which indicate infection. IT is possible to have fluid in the middle ear without any of these symptoms, and without infection. You should contact your doctor if someone in your family complains of these symptoms.

NERVE LOSS: Sensorineural or nerve-type hearing loss occurs in the inner ear. There are many causes for this type of hearing loss. The amount of loss can range from slight at one frequency or pitch to severe deafness at many frequencies or pitches. The percentage of children who have this type of hearing loss is small. Special testing may be necessary to determine more specifically the degree and extent of the problem.

Any of the above ear problems can be serious. Some may result in further damage to the ears if left untreated, and each type of problem can result in educational and or speech impair-problem. Contact your school or public health nurse if you have questions later.



SOME OF THE TERMS USED AT OTOLGY CLINICS

Audiogram - A display of hearing responses for a range of frequencies or pitches.

Audiologist - A specialist concerned with hearing disorders who is certified by the American Board of Examiners in Audiology.

Cerumen - Ear wax; normally present in the ear canal to protect the ear.

Cholesteatoma - A tumor-like growth in the middle ear space which must be removed surgically.

Cochlea - Sensory end organ of hearing in the inner ear. Destruction of the receptor cells is permanent.

Conductive hearing loss - Hearing loss which is due to any blocking of sound between the outside of the ear and the inner ear.

Congenital hearing loss - Hearing loss which was present at birth or is assumed to have been present at birth. This type of hearing loss can be hereditary or genetic, or may be due to prenatal or natal causes.

Deafness - Some people use this term to describe a complete loss of hearing, but most specialists use it when describing the full range of hearing loss from slight to profound.

Decibel - The unit of measure for the intensity of sound.

Eustachian Tube - A passage from the back of the nose to the middle ear.

Myringotomy - A surgical procedure to make an opening in the ear drum.

Nerve deafness - This is the term that is usually used to describe a hearing loss due to permanent damage to the inner ear. Another term for this type of hearing loss is **sensorineural hearing loss**.

Ossicles - Three tiny bones in the middle ear which aid the conduction of sound vibrations from the ear drum to the inner ear.

Otitis Externa - An infection of the ear canal or outer ear.

Otitis Media - An infection of the middle ear; most often serious otitis media (S.O.M.), which means fluid is present behind the eardrum.

Otologist - A physician and surgeon who specializes in disorders of the ear.

P.E. Tubes - Polyethylene tubes (other materials may be used) which are surgically placed through a myringotomy to allow ventilation of the middle ear space.

Retracted Tympanic Membrane - Eardrum is sucked into the middle ear indicating less air pressure behind the drum than in front of it. This symptom often suggests the eustachian tube is not functioning properly.

Tympanic Membrane - The eardrum